PTO/SB/01 (08-03)

Approved for use through 07/31/2006. OMB 0651-0032 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number. **Attorney Docket Number** DECLARATION FOR UTILITY OR First Named Inventor DESIGN PATENT APPLICATION COMPLETE IF KNOWN (37 CFR 1.63) **Application Number** Filing Date Declaration Declaration Submitted Submitted after Initial **Art Unit** With Initial Filing (surcharge Filing (37 CFR 1.16 (e)) **Examiner Name** required) I hereby declare that: Each inventor's residence, mailing address, and citizenship are as stated below next to their name. I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled: SOFTWIRE ENARLED CONTROL METHODONG FOR SYSTEMS WITH LUMINENT DEVICES (Title of the Invention) the specification of which X is attached hereto OR was filed on (MM/DD/YYYY) as United States Application Number or PCT International Application Number and was amended on (MM/DD/YYYY) (if applicable). I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application. I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed. **Prior Foreign Application Foreign Filing Date** Priority Certified Copy Attached? Country Number(s) /MM/DD/YYYY) Not Claimed Yes Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]
This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: C mmissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PTO/SB/01 (08-03)

Approved for use through 07/31/2006. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION — Utility or Design Patent Application

				· · · · · · · · · · · · · · · · · · ·
Direct all correspondence t	co: Customer Number:	OR	Corresp	condence address below
Name	_ \			
GEORGE /	HEDSORE PARSON	NS		
Address	EGEAN SRIVE			,,,,
City	CACINO OFFICE	State		ZIP
SAN DIE	**************************************	Fax 619-26		
Country U. (A	Telephone 6/9-267-	47/0 C	619-267	-4760 0)
I hereby declare that all sta	tements made herein of my own k	nowledge are true and	that all stateme	nte made en Information
statements and the like so	o be true; and turther that these made are punishable by fine or im-	statements were mad	e with the know der 18 U.S.C. 18	wladge that willful false
false statements may jeopa	rdize the validity of the application of	or any patent issued the	reon.	SO I GIIG TIGE SOON WING
NAME OF SOLE OR FIRS	TINVENTOR:	A petition has been file	d for this unsign	ed inventor
Given Name (first and middle [if any]) ,	Family	Family Name		
(mat and middle [it airy])	rat	or Sum	ame SANC	HEZ OLEA
Inventor's	0 . 22		1	Date
Signature Jow	Sauch Olea			HEZ OLEA Date 10/6/03
Residence: City	State	Country	Citizen	ship
POWAY	CA	USA	U	A
Mailing Address	1/0-0 . 0			
	KSTAND ROAD			
TOWA Y	State	ZIP	/ / /	Country
120011	I CH	920	69	USA
NAME OF SECOND INVEN	TOR:	A petition I	has been filed fo	r this unsigned inventor
Given Name		Family N	ame	
(first and middle [if any])		or Suma	me	
Inventor's Signature			C	Date
R sidence; City	State	Locuster		
· · · · · · · · · · · · · · · · · · ·	Otate	Country	Citizens	snip
Mailing Address				· · · · · · · · · · · · · · · · · · ·
City	State	ZIP	Country	,
			1	
		<u></u>		· · · · · · · · · · · · · · · · · · ·
Additional inventors or a lega	representative are being named on the	supplemental sheet(s) PTC	0/SB/02A or 02LR att	ached hereto.
• • • • • • • • • • • • • • • • • • • •				

X

PTO/SB/81 (09-03) Approved for use through 11/30/2005. OMB 0651-0035 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Application Number **Filing Date POWER OF ATTORNEY** First Named Inventor and Title **CORRESPONDENCE ADDRESS** Art Unit INDICATION FORM Examiner Name **Attorney Docket Number** I hereby appoint Practitioners associated with the Customer Number: OR Practitioner(s) named below: Name Registration Number as my/our attorney(s) of agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith. Please recognize or change the correspondence address for the above-identified application to: The address associated with the above-mentioned Customer Number: OR The address associated with Customer Number: OR Firm or Individual Name Address Address City State Zip Country Telephone Fax am the: X

*Total of forms are submitted. This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments to the USPTO in the individual case. Any comments the formation of the individual case. on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple

SIGNATURE of Applicant or Assignee of Record

Telephone 858-270-2399

Applicant/Inventor.

forms if more than one signature is required, see below.

Name Signature

Assignee of record of the entire interest. See 37 CFR 3.71, Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)